

Tab 7 – Intervention Selection Form Area 6 Bexar

Subpopulation: FMS Women African American Ranking: 6

Name of Intervention S6	Enhancing Motivation to Reduce Risk of HIV Infection for Economically Disadvantaged Urban Women
Risk Behavior(s)	<ul style="list-style-type: none"> • Unprotected sex • Multiple sex partners • Substance use
Influencing Factor(s) or FIBs	<ul style="list-style-type: none"> • Perceived susceptibility • Self-efficacy • Intentions • Substance use • Group norms <p>Cultural norms Social Support Sense of Community Expected Outcomes</p>
Intended Immediate Outcomes	To reduce HIV -related risk behavior such as, increasing HIV related knowledge, increasing awareness of personal risk perception and combining motivational enhancement strategies with behavioral skills training.
Type	GLI
Setting	Community-based organization
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	Women's issues of having unprotected sex, multiple sex partners as well as substance use keeps them at risk for HIV. By providing the women with ethnically matched, trained therapists, it allows providers a setting for HIV education, behavioral-skills training and extensive role-playing and personal feedback.

Tab 7 – Intervention Selection Form Area 6 Bexar

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Name of Intervention	Community Demonstration Project
C2	
Risk Behavior(s)	<ul style="list-style-type: none"> • Sex without condoms • Sharing unsterile injection equipment
Influencing Factor(s) or FIBs	<ul style="list-style-type: none"> • Self-efficacy Group norms • Peer pressure • Social support • Environmental facilitators (access to condoms and bleach kits) • Intentions • Expected outcomes • Perceived susceptibility • Cultural norms
Intended Immediate Outcomes	<p>To increase condom use with main and non-main partners</p> <p>To increase disinfection of injecting equipment</p>
Type	Community Level
Setting	Street settings, public sex environments, other community venues
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	Individuals in the intervention communities demonstrated significantly greater achievement of consistent condom use and maintenance of consistent condom use with non-main partners than individuals in the comparison communities.

Tab 7 – Intervention Selection Form Area 6 Bexar

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Name of Intervention S4	STD and HIV Risk in Heterosexual Adults Attending a Public STD Clinic
Risk Behavior(s)	<ul style="list-style-type: none"> • Unprotected sex
Influencing Factor(s) or FIBs	<ul style="list-style-type: none"> • Perceived susceptibility • Self-efficacy • Intentions • Communication and negotiation skills • Cultural norms • Expected outcomes • Social support • Relationship development
Intended Immediate Outcomes	<p>Goal: To decrease STDs and the number of risky sexual behaviors</p> <p>Objectives:</p> <ul style="list-style-type: none"> • To increase knowledge about the transmission and prevention of HIV/AIDS • To build effective decision-making and communication skills <p>To identify and modify STD/HIV -related risk factors and psychosocial antecedents</p>
Type	Individual Level
Setting	STD clinic in an urban area
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	Participants learn about transmission modes and prevention of HIV/AIDS, assess their personal risk, practice condom-use skills, and develop a risk-reduction plan. They also develop effective communication and self-efficacy skills.

Tab 7 – Intervention Selection Form Area 6 Bexar

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Name of Intervention	The SISTA Project
Risk Behavior(s)	<ul style="list-style-type: none"> Unprotected sex
Influencing Factor(s) or FIBs	<ul style="list-style-type: none"> Self-efficacy Self-esteem Relationship development Interpersonal power dynamics Communication and negotiation skills Peer pressure Group norms Cultural norms Social support
Intended Immediate Outcomes	<p>Goal: To increase consistent condom use</p> <p>Objectives:</p> <ul style="list-style-type: none"> To emphasize ethnic and gender pride <p>To provide the social skills necessary to negotiate condom use</p>
Type	Group Level Intervention
Setting	Community Center
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	Women who participated in this intervention were significantly more likely than women in the comparison group to report consistent condom use with their partners, negotiating condom use, and not having sex when a condom was not available.

Tab 7 – Intervention Selection Form Area 6 Bexar

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Name of Intervention	Culturally Tailored HIV/AIDS Risk-Reduction Messages Targeted to African-American Urban Women: Impact on Risk Sensitization and Risk Reduction
Risk Behavior(s)	<ul style="list-style-type: none"> • Unprotected sex
Influencing Factor(s) or FIBs	<ul style="list-style-type: none"> • Perceived susceptibility • Environmental facilitators (access to condoms) • Peer pressure • Group norms • Cultural norms • Substance abuse • Self-esteem • Sense of community
Intended Immediate Outcomes	<p>Goals: To promote HIV-antibody testing and condom use</p> <p>Objectives:</p> <ul style="list-style-type: none"> • To increase awareness of personal risk <p>To encourage communication about AIDS with partners and friends</p>
Type	Group Level Intervention (small groups of 6-10 participants)
Setting	Community-based Family Resource Center
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	<p>Women who participated in this study were more likely to view AIDS as a personal threat and to report behaviors that were consistent with increased perceived threat during follow up. They were more likely to request condoms, to talk with their friends about AIDS, and to get tested for HIV than women who viewed a standard HIV prevention tape or a tape that was gender-ethnicity matched but without a cultural context. Participants also reacted to the video with more fear, anxiety, and concern than participants in the other groups.</p>

Tab 7 – Intervention Selection Form Area 6 Bexar

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Name of Intervention S 17	Context Framing to Enhance HIV -Antibody-Testing Messages Targeted to African-American Minority Women
Risk Behavior(s)	<ul style="list-style-type: none"> • Not getting tested • Unprotected sex
Influencing Factor(s) or FIBs	<ul style="list-style-type: none"> • Perceived susceptibility • Perceived severity • Peer pressure • Substance use • Intentions • Group norms • Cultural norms
Intended Immediate Outcomes	<p>Goal: To promote HIV -antibody testing</p> <p>Objectives:</p> <ul style="list-style-type: none"> • To increase awareness of personal risk <p>To encourage communication about condom use and AIDS with partners and friends</p>
Type	Group Level
Setting	Urban women's health and reproductive care clinic
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	Among women who expressed intentions of getting tested after viewing the video, 63% of those viewing the video emphasizing personal losses got tested compared to 23% who viewed a gender-ethnicity matched video and 0% who viewed an ethnicity-matched video. Approximately 71% of women who viewed the message-framing video talked with their partners about getting tested. The video had no effect on reported condom use.

Tab 7 – Intervention Selection Form Area 6 Bexar

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Name of Intervention	Project RESPECT
C 11	
Risk Behavior(s)	<ul style="list-style-type: none"> • Sex without condoms
Influencing Factor(s) or FIBs	<ul style="list-style-type: none"> • Attitudes • Group norms • Intentions • Self-efficacy • Expected outcomes • Perceived susceptibility
Intended Immediate Outcomes	To reduce high risk behaviors and prevent new STDs
Type	Individual Level (Prevention Counseling)
Setting	STD Clinic
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	Participants in both counseling interventions reported significantly higher condom use compared with participants in the comparison condition. Of the counseling participants, 30% fewer had new STDs compared with participants in the didactic message condition. In the counseling interventions, benefits accrued equally to men and women, and STD reduction was higher among adolescents than older participants.

Tab 7 – Intervention Selection Form Area 6 Bexar

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Name of Intervention	Project LIGHT
S 5	
Risk Behavior(s)	<ul style="list-style-type: none"> • Unprotected sex
Influencing Factor(s) or FIBs	<ul style="list-style-type: none"> • Perceived susceptibility • Self-efficacy • Intentions • Expected outcomes • Communication and negotiation • Relationship development
Intended Immediate Outcomes	<p>Goal: To reduce HIV -related sexual risk behavior among low-income women and men served in STD clinics and health service organizations.</p> <p>Objectives:</p> <ul style="list-style-type: none"> • To acquire new knowledge and risk reduction skills • To rehearse new behavior patterns • To build group norms to support safer sex efforts <p>To practice new behaviors with a social group of persons with similar life experiences and social demographic backgrounds</p>
Type	Group Level Intervention
Setting	STD Clinic
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	<p>This intervention significantly reduced unprotected intercourse and also significantly increased condom use and increased the percent reporting consistent condom use or abstinence. Intervention participants reported significantly fewer STD symptoms at follow-up, for male STD patients in particular, and the overall population had fewer diagnosed STDs at follow-up.</p>

Tab 7 – Intervention Selection Form Area 6 Bexar

ALL HMAZs and the LMAZ

Subpopulation: All high priority subpopulations, consistent with CDC Guidance, September 1997

Rankings: Same as the corresponding group in selected HMAZ, LMAZ

Name of Intervention	Prevention Case Management (PCM)
Risk Behavior(s)	Multiple high risk behaviors consistent with HIV Prevention Case Management Guidance, September 1997 by the CDC Substance use Sex without condoms Multiple partners
Influencing Factor(s) or FIBs	Perceived susceptibility Fatalism Self Efficacy Peer Pressure Cultural group norms
Intended Immediate Outcomes	Increase condom use Decrease number of partners Increase Self Esteem Referral for new HIV positives into Early Intervention Programs Referral of HIV positives into more intensive Intervention Programs that address the Factors Influencing the Risky Behavior.
Type	Individual Level Intervention
Setting	Community based organization, STD clinics, other locations
Currently provided?	No
Rationale for selecting intervention:	This intervention should target only high-risk individuals, whether HIV -positive or HIV -negative, with multiple, complex problems and risk-reduction needs. This intensive, client-centered prevention activity has the fundamental goal of promoting the adoption and maintenance of HIV risk-reduction behaviors. It is suitable for individuals seeking stability and regularity in their lives and/or individuals who are reaching an action step in dealing with health concerns. PCM should include 1) client recruitment and engagement, 2) screening and assessment of HIV and STD risks and medical and psychosocial service needs, 3) development of a client-centered prevention plan, 4) multiple session HIV risk-reduction counseling, 5) active coordination of services with follow-up, 6) monitoring and reassessment of client's needs, risks, and progress, and 7) discharge from PCM services upon attainment and maintenance of risk-reduction goals.

pcm

Tab 7 – Intervention Selection Form Area 6 Bexar

ALL HMAZs and the LMAZ

Subpopulation: All BDTPS; all subpopulations; all races, ethnicities and ages
 Rankings: Same as the corresponding group in selected HMAZ, LMAZ

Name of Intervention	Prevention Counseling/Partner Elicitation
Risk Behavior(s)	Substance use Sex without condoms Multiple partners
Influencing Factor(s) or FIBs	Perceived susceptibility Environmental facilitators (access to condoms and testing) Knowledge of STDs Group or Cultural Norms
Intended Immediate Outcomes	Increase proportion of HIV-infected persons who know their status Increase condom use Improve communication and negotiation skills Improve self perception of risk Provide access to condoms and testing Improve knowledge of STDs Reduce Number of sex partners
Type	Individual Level Intervention
Setting	Community based organization, STD clinics, other community-based locations
Currently provided?	Yes
Rationale for selecting intervention:	<p>Counseling, testing, referral and partner services have been recommended as an effective intervention for all populations in Texas. In the Centers for Disease Control and Prevention's HIV Prevention Strategic Plan Through 2005, Goal 2 is to increase the proportion of HIV-infected people in the U.S. who know they are infected through voluntary counseling and testing. The CDC's objectives to meeting this goal support the inclusion of this intervention for all populations. These objectives include: improving access to voluntary, client-centered counseling and testing in high seroprevalance populations and increasing the number of providers who provide voluntary, client-centered counseling and testing. The core elements of this intervention include risk assessment, risk reduction plan, and the option to test for HIV either anonymously or confidentially.</p> <p>The Texas CPGs recommend the following strategies to promote PCPE: 1) Fact Sheet p. 31. Culturally Tailored HIV/AIDS Risk-Reduction Messages Targeted to African-American Urban Women. This 20-minute video increased the likelihood that women would view HIV as a personal risk, to</p>

	<p>request condoms, to talk with friends about AIDS, and to get tested for HIV.</p> <p>2) Fact Sheet p. 34 Context Framing to Enhance HIV Antibody Testing Messages Targeted to African-American Women. This 25-minute video emphasizes the personal losses from not testing. Women were more likely to get tested and to talk to partners about testing after this video.</p> <p>3) Single session HIV/AIDS informational education: basic informational sessions discussing risks, correct condom and bleach kit use, referrals and the like enhance participants willingness to test either during or after the session.</p> <p>4) Bar outreach: sustained, consistent presence in a bar type setting enhances testing. The specific outreach that is known to work consisted of weekly presence in the bar, with an informational table, with staff present and interacting with bar managers, performers and patrons for 2-4 hours at a time. Testing was conducted at the bar or referral made to a community-based organization. Staff gained the trust of all through their sustained efforts.</p> <p>pcpe</p>
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